

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000140106

**Entity Name:** CRUM & SONS LLC

**Current Principal Place of Business:**

188 LOVELL ROAD  
FREEPORT, FL 32439

**Current Mailing Address:**

188 LOVELL ROAD  
FREEPORT, FL 32439 US

**FEI Number:** 47-1756105

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

CRUM, CLINT R  
188 LOVELL ROAD  
FREEPORT, FL 32439 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            AMBR  
Name            CRUM, CLINT R  
Address        188 LOVELL ROAD  
City-State-Zip: FREEPORT FL 32439

Title            AMBR  
Name            CRUM, RANDALL H  
Address        188 LOVELL ROAD  
City-State-Zip: FREEPORT FL 32439

Title            AMBR  
Name            CRUM, SHANE D  
Address        188 LOVELL ROAD  
City-State-Zip: FREEPORT FL 32439

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SHANE CRUM

**MANAGER**

**04/26/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date